

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SW</i>	<i>68906</i>	<i>10/27/00</i>
O.I.P.E. CLASSIFIER		<i>10</i>	<i>11-8-00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>JB</i>	<i>70202</i>	<i>2-2</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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